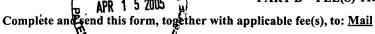
APR 1 5 2005

PART B - FEE(S) TRANSMITTAL



Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000

or <u>Fax</u>

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SILICON VALLEY CENTER 801 CALIFORNIA STREET MOUNTAIN VIEW, CA 94041 4/18/2005 DEMMANU2 00000062 10039887					I hereby certify that this Fee(s) Transmittal is being deposited with the Unit States Postal Service with sufficient postage for first class mail in an enveloy addressed to the Mail Stop ISSUE FEE address above, or being facsimi transmitted to the USPTO (703) 746-4000, on the date indicated below.					
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10/039,887	10/039,887 01/03/2002		Robert E. V		Woodard		23488-09186		8704	
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLIC	CATION FEE	TOTAL FE	E(S) DUE	DATE DUE		
nonprovisional	NO	\$70			\$0	\$70		05/25/2005		
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ROANE,	AARON F	; 3739	•	606	-028000					
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Fenwick & West LLI 2 3							
3. ASSIGNEE NAME AND	RESIDENCE DATA TO E	BE PRINTED ON T	THE PATEN	Γ (print or tyr	ne)					
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified by 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app T a substitute	ear on the pa	ntent. If an assignment.	gnee is identified	d below, the o	document has bee	n filed t	
(A) NAME OF ASSIGN	EE	(B) RESIDENC	CE: (CITY an	d STATE OR CO	OUNTRY)				
AFX INC.		F	remont	, Calif	ornia					
Please check the appropriate	e assignee category or catego	ories (will not be pr	inted on the p	patent): 📮	Individual 🙀	Corporation or o	ther private gr	oup entity 🚨 G	overnme	
4a. The following fee(s) are	enclosed:	4b	. Payment of	Fee(s):						
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Authorized Signature	Qu	, 5	mitt		Date	4	205			
Typed or printed name _	Typed or printed name Albert C. Smith			Registration No. 20,355						
This collection of information an application. Confidential submitting the completed a	ity is governed by 35 U.S.C	. 122 and 37 CFR	1.14. This col	llection is esti	mated to take 12	minutes to com	iplete, includii	ng gathering, prej	oaring, a	

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